

WAGPET 

GP Training Facility

Policy Handbook

2021

Contents

POLICY RATIONALE.....	3
OVERARCHING POLICY STATEMENT	4
POLICY SCOPE.....	4
DATE OF EFFECT.....	4
POLICY AND PROCEDURE.....	5
TF1.0 PROFESSIONAL BEHAVIOUR POLICY.....	5
TF2.0 ACCREDITATION POLICY	6
TF3.0 EMPLOYMENT AGREEMENTS WITH GP REGISTRARS POLICY.....	8
TF4.0 PLACEMENT POLICY	10
TF5.0 TRAINING FACILITY AND AHT SALARY SUPPORT PAYMENTS POLICY.....	10
TF6.0 ISSUES RESOLUTION POLICY	11
TF7.0 APPEALS AND COMPLAINTS POLICY	14
TF8.0 REGISTRAR AT RISK POLICY	16
TF9.0 SUPERVISOR EDUCATION POLICY.....	17
TF10.0 EXTERNAL CLINICAL TEACHING VISITOR/FORMATIVE MINI-CEX ASSESSOR POLICY	18
TF11.0 TRAVEL AND ACCOMMODATION REIMBURSEMENT POLICY.....	21
TF12.0 EXTENUATING AND UNFORESEEN CIRCUMSTANCES DEFINITION	23
TF13.0 SUPERVISION POLICY	23
TF14.0 PRIVACY POLICY	25
TF15.0 EMERGENCY REMOTE SUPERVISION POLICY	32

We respectfully acknowledge the people of the many countries and language groups of Western Australia, and recognise their continuing custodianship of the land and seas on which we live and work. We acknowledge the Elders past and present and pay respect to the Aboriginal communities from which they come.

POLICY RATIONALE

Western Australian General Practice Education and Training (WAGPET) is committed to providing a quality, safe training experience for GP registrars training with WAGPET on the Australian General Practice Training (AGPT) program.

Successful training outcomes rely on a partnership between the GP registrar, GP supervisor, training facility and WAGPET, with each parties' contribution being an essential element to the training experience.

The Department of Health (DOH), Australian College of Rural and Remote Medicine (ACRRM) and Royal Australian College of General Practitioners (RACGP) provide a suite of policies and standards that WAGPET and our training participants must adhere to. Where AGPT policy and college standards are silent, WAGPET policy stands independently and must be followed.

This policy framework outlines the policy requirements for GP trainers providing placement, training and education services for the AGPT program.

Adj Prof Janice Bell

Chief Executive Officer

OVERARCHING POLICY STATEMENT

Western Australian General Practice Education and Training (WAGPET) adopts all Australian General Practice Training (AGPT) policy as its first line policy. Supplementary WAGPET policy is appended to the AGPT policy foundation where required.

WAGPET adopts all Australian College of Rural and Remote Medicine (ACRRM) and Royal Australian College of General Practitioners (RACGP) policies and standards as they apply to WAGPET participants in its policies and references those standards where the AGPT policy may be silent.

When there is a change at the AGPT or college level, WAGPET policy will be changed in order to remain compliant with the higher order policy.

WAGPET may introduce more specific additional requirements in order to manage the implementation of the policies and standards locally.

AGPT trainers with WAGPET must adhere to all levels of this policy handbook.

Procedures have been developed for and may be included within the policy or held separately. Documented procedures outline how relevant program participants and staff must work to implement the policy.

For each WAGPET policy, where relevant the foundation AGPT policies and college requirements are identified and must be accessed in order to understand and to abide by the WAGPET policy.

In some cases, there is no WAGPET supplement to the AGPT policy but WAGPET publishes the procedures it adopts in implementing the AGPT policy.

All policies within this handbook together form a logical and coherent whole and in most cases, several policies will be related and of relevance to participants. Participants are advised to access all policies they consider relevant to the question or situation at hand.

All GP trainers working with WAGPET to provide services for the AGPT program must comply with the conditions of this policy handbook. Failure to comply with this policy handbook may lead to de-accreditation as a supervisor and/or training facility on the AGPT program.

POLICY SCOPE

All GP trainers, external clinical teaching visitors, training facilities and their staff providing services in relation to the Western Australian General Practice Education and Training (WAGPET) Australian General Practice Training (AGPT) program.

DATE OF EFFECT

1 July 2017

POLICY AND PROCEDURE

TF1.0 PROFESSIONAL BEHAVIOUR POLICY

Last revision: 28 May 2020

Inappropriate professional behaviour can have a significant impact on other program participants, affect workplace health and safety as well as the delivery of the Western Australian General Practice Education and Training (WAGPET) training program.

Appropriate professional behaviour and conduct is expected of all GP supervisors and training facility staff providing training on the WAGPET Australian General Practice Training (AGPT) program.

WAGPET is committed to ensuring that all participants involved in the WAGPET training program behave in an appropriate professional manner.

WAGPET has zero tolerance towards unacceptable professional behaviour and provides an environment of mutual respect for all participants.

GP supervisors and training facility staff are expected to:

- ensure that patient safety is of the highest concern.
- always behave in an appropriate manner and comply with professional codes of conduct such as the Australian Health Practitioner Regulation Agency (AHPRA) Good Medical Practice: A Code of Conduct for Doctors in Australia.
- demonstrate respect for patients, colleagues, GP registrars, WAGPET program staff and external program stakeholders.
- act in accordance with the law and demonstrate honesty, integrity and trustworthiness.
- treat all personal and/or confidential information with respect and in accordance with privacy legislation requirements.
- comply with the documented employment agreement between themselves and the GP registrar with respect to agreed employment terms and conditions for the training term.
- ensure all reasonable steps have been taken to ensure readiness for the GP registrar to start work on the agreed date.
- provide a training facility orientation for the GP registrar and facilitate the transition period for GP registrars who are new to the training facility and may have limited general practice experience.
- provide the GP registrar with a copy of or direction to all training facility policies and/or guidelines.
- ensure that an appropriate share of the patient load is allocated to the GP registrar.
- demonstrate willingness to actively engage in the learning process for GP registrars by setting aside the required teaching time, providing a broad clinical exposure to patients, releasing GP registrars to attend mandatory program requirements and completing all assessments in a timely manner.
- ensure continuing professional development as a GP trainer is maintained
- ensure timeliness and responsiveness with required program documentation and communications from WAGPET.
- comply with the terms and conditions of the Training Service Deed.

As per AHPRA's good medical practice guide, [section 3.14](#) GP supervisors are strongly advised to:

“Whenever possible, avoid providing medical care to anyone with whom you have a close personal relationship. In most cases, providing care to close friends, those you work with and family members is inappropriate because of the lack of objectivity, possible discontinuity of care, and risks to the doctor and patient. In some cases, providing care to those close to you is unavoidable. Whenever this is the case, good medical practice requires recognition and careful management of these issues”.

Process for dealing with inappropriate behaviour

Where WAGPET identifies or is notified of inappropriate professional behaviour, it will take action to address the issues immediately.

Incidents involving GP supervisors and training facility staff will be documented and reported to the WAGPET Chief Program Officer (CPO) and/or Clinical Director of Training (CDT).

The report will include details of the event(s) and evidence to substantiate claims. The report must also outline any action that has been planned, has already occurred and/or recommendations to resolve the issue. The CPO and/or CDT will inform all relevant parties in writing of the actions to be undertaken including any necessary intervention. The Australian College of Rural and Remote Medicine (ACRRM) and/or Royal Australian College of General Practitioners (RACGP) and AHPRA will be notified as appropriate.

If the action/intervention does not resolve the issue or the issue becomes more serious in nature, the CPO and/or CDT will escalate to the Chief Executive Officer (CEO) who will assess the situation and determine a course of action which may include meeting with the party or parties involved. The resulting action will be documented and provided to those involved.

Issues that are ongoing or not resolved will be managed in consultation with ACRRM and/or RACGP and the Department of Health (DOH). The WAGPET CEO may remove a GP registrar from the facility temporarily whilst the issue is being investigated or may remove the GP registrar permanently.

TF2.0 ACCREDITATION POLICY

Last revision: 24 February 2021

Under the Standards for General Practice Training, the Royal Australian College of General Practitioner (RACGP) delegates the responsibility of accrediting GP supervisors and training facilities to Western Australian General Practice Education and Training (WAGPET). Under the ACRRM training Organisations Standards 2020 for Supervisors and Teaching Posts and the Advanced Specialist Training Standards for Supervisors and Teaching Posts_Australian College of Rural and Remote Medicine (ACRRM) delegates the accreditation process to WAGPET and makes the final accreditation determination based on WAGPET's recommendation.

All WAGPET accredited GP supervisors and training facilities must comply with the standards specific to the accreditation. This includes the requirement for all GP supervisors to have unconditional Specialist General Practice registration listed with AHPRA.

All WAGPET accredited GP supervisors and training facilities must comply with the requirements of the WAGPET Training Services Deed and AGPT and WAGPET policies.

WAGPET will recommend to the colleges for withdrawal of accreditation if it believes there are significant issues relating to GP registrar safety, supervision or teaching.

Where GP supervisor and/or training facility accreditation is withdrawn, WAGPET will initiate an immediate facility placement change for any affected GP registrars.

Training facility accreditation

The training facility must have a nominated accredited GP supervisor at all times. In the event the nominated GP supervisor is unable to continue in the role, another accredited GP supervisor must be appointed. The nominated GP supervisor is ultimately responsible for ensuring a safe, quality training environment for the GP registrar as well as compliance with the accreditation requirements.

All WAGPET accredited training facilities must have:

- accreditation from Australian General Practice Accreditation Limited (AGPAL), General Practice Accreditation (GPA) or equivalent, for RACGP training facilities
- their accreditation approved by ACRRM, for ACRRM training facilities
- GP supervisors and training facility staff that are fully committed to GP registrar training and assessment
- a wide range of patient demographics reflective of college curricula
- a nominated GP supervisor who has unconditional registration as a general practitioner and either a Fellowship of the Royal Australian College of General Practitioners (FRACGP), Fellowship of the Australian College of Rural and Remote Medicine (FACRRM) or equivalent professional recognition, and
- a process to advise WAGPET within 10 working days of any significant event that may compromise the facility's accreditation status including:
 - any changes that impact the facility's ability to contract with or to remain in contract with WAGPET and fulfil the requirements outlined in the Training Services Deed
 - any changes to supervisor unconditional medical registration
 - loss of key personnel including GP supervisors
 - loss of AGPAL or GPA unconditional accreditation for RACGP facilities
 - loss of ACRRM unconditional accreditation for ACRRM facilities
 - any facility practitioner being charged e.g. Medicare fraud, illegal billing practices, patient mistreatment
 - adverse findings against a GP supervisor by any legal or professional body
 - any notifiable conduct or incidents reported to Australian Health Practitioner Regulation Agency (AHPRA)
 - changes to the business that affect the ability to continue to employ or train the GP registrar
 - critical incidents that impact the GP registrar's training safety or quality directly or indirectly, and
 - any significant situations or disputes that impact the GP registrar's safety, wellbeing, working conditions or Australian General Practice Training (AGPT).
- demonstrated capacity to train AGPT registrars including:
 - adequate GP supervisor numbers for the GP registrars requested
 - adequate physical space in the training facility including consulting rooms
 - sufficient patient numbers in the training facility or across related facilities, and
 - a written plan as to how the supervision, teaching and assessment will be conducted.

Following the submission of a compliant accreditation application, a site visit will be conducted to confirm the training facility and GP supervisor's ability and commitment to train GP registrars of all term levels.

Training facilities are accredited to take an approved maximum number of GP registrars, up to 2 Full-Time Equivalent (FTE). Approved training capacity, above 2 FTE can only be varied with the approval of the Clinical Director Training (CDT) and only where the facility can demonstrate there will be adequate, dedicated supervision and teaching, sufficient patient load and mix, local community demand and physical capacity within the training facility.

Approved facility training capacity is displayed on the WAGPET website as a capacity table in the Facility Finder.

Maintaining accreditation

WAGPET assesses the ongoing performance of all facilities over the three-year accreditation cycle to ensure the standards of GP registrar training and safety are maintained. This assessment is conducted using a multi-source process including but not limited to:

- conducting practice visits and random audits
- reviewing GP supervisor education and teaching performance
- reviewing GP registrar patient consulting data
- collecting feedback from GP registrars, External Clinical Teaching (ECT) visitors and WAGPET staff, and
- reviewing complaints or concerns raised from any of the above, from patients or any other reliable witness.

WAGPET will advise the GP supervisor and training facility when reaccreditation is due. WAGPET may require a site visit, depending on a review of evidence collected over the previous three years.

If the accreditation criteria are met in full, accreditation may be granted for a further three years, subject to acceptance/approval by the relevant college.

Failure to meet the accreditation requirements will lead to restricted or loss of accreditation and the relevant colleges being advised.

Training facilities whose accreditation has lapsed, may re-apply at any time and will be reassessed at the time of reapplication.

Withdrawal of accreditation

If the GP supervisor or training facility fails to meet their accreditation obligations, WAGPET may make a recommendation to the relevant college to withdraw accreditation.

WAGPET will advise the GP supervisor and training facility in writing of the reasons for the withdrawal of accreditation.

WAGPET will advise the GP supervisor and training facility in writing about the withdrawal, immediate or otherwise, of any current GP registrars and will assist those GP registrars to find alternative placements.

Withdrawal of accreditation may occur at any time when there is:

- a serious breach of the college or WAGPET accreditation requirements, Standards or policies; or
- WAGPET considers the GP registrar or patients are at risk.

Withdrawal of accreditation for a GP supervisor and/or training facility requires the approval of the WAGPET Chief Executive Officer (CEO) or delegated officer.

Any decisions may be appealed in accordance with the WAGPET Appeals and Complaints Policy.

TF3.0 EMPLOYMENT AGREEMENTS WITH GP REGISTRARS POLICY

Last revision: 25 August 2021

Please refer to the National Terms and Conditions for the Employment of Registrars (NTCER) and your WAGPET Training Services Deed.

GP registrars and GP supervisors and/or training facilities have obligations to each other when being recruited and trained under the Australian General Practice Training (AGPT) program. These must be understood, agreed and honoured.

GP registrars have restricted employment opportunities as a result of their training obligations, and the NTCER protects GP registrar employment conditions above and beyond the usual employment requirements for general practitioners. The NTCER is not an award and is overarched by Fair Work Australia and any other relevant employment related legislation.

Western Australian General Practice Education and Training (WAGPET) does not participate in

agreement negotiations between GP registrars and training facilities but requires the NTCER to be adopted in agreements with GP registrars in private general practice.

GP registrars are not permitted to change their placement once a placement is confirmed except in unforeseen and extenuating circumstances (see definition in TF12.0 Extenuating and Unforeseen circumstances).

National Terms and Conditions for the Employment of Registrars

All WAGPET accredited training facilities must implement the NTCER requirements within GP registrar employment agreements, except where the NTCER expressly provides for a training facility not to (Clause 3 – Exclusions). Failure to do so is grounds for placement withdrawal and, in repeated instances, withdrawal of the training facility's accreditation.

WAGPET will assist in mediating relatively simple misunderstandings between GP registrars and training facilities, but strongly recommends both parties get expert advice where necessary.

WAGPET requires GP registrars and GP supervisors to uphold written agreements. Training facilities that do not honour their employment agreement with their GP registrar may find themselves in an industrial dispute and may have their GP registrar withdrawn without notice as a consequence.

WAGPET can override an employment agreement where there is a breach of the Training Services Deed or if WAGPET deems the GP registrar may be unsafe or may not be receiving quality training. WAGPET does not need the permission or agreement of the GP registrar or the GP supervisor to do so.

WAGPET will intervene with the option of a critical incident investigation, the suspension of training or withdrawal of the GP registrar or any other action deemed necessary where there are allegations of the GP registrar being:

- coerced passively or actively to act illegally e.g. Medicare fraud
- subject to physical or sexual harassment
- subject to personal or professional bullying, and/or
- given inadequate or inappropriate supervision and teaching given their learning needs.

Where variations to the NTCER are prospectively mutually agreed between the GP registrar and the training facility, these variations must be discussed with WAGPET and will be approved provided that they do not result in a diminution of training conditions (whether financial and/or experiential) for the GP registrar.

WAGPET will not recognise any restrictive covenants included in the employment agreement between a GP registrar and a training facility when arranging placements while the GP registrar is with the AGPT program.

Training Services Deed

WAGPET enters into a Training Services Deed with the training facility. Any proposed variations to the Training Services Deed must be negotiated with WAGPET prospectively and agreed by the WAGPET Chief Executive Officer (CEO) or nominated delegate. The Training Services Deed covers all the contractual requirements for being a training facility employing registrars, including the requirement to implement the NTCER.

Managing placement and employment issues

During placement, issues may arise which impact on the safety of GP registrars and the quality of training when they are employed in that facility. In the first instance, WAGPET expects the parties to the employment agreement to undertake internal discussions to attempt to come to a mutually agreed resolution.

If these initial discussions do not achieve this objective, then WAGPET will facilitate a mediated discussion between the parties and assist the parties to come to a mutually acceptable resolution.

This may require the assistance of external agencies such as the Australian Medical Association (AMA) WA, GP Supervisors Australia (GPSA) and GP Registrars Australia (GPRA).

At any stage GP supervisors, training facilities and GP registrars may engage the assistance of the regional Registrar Liaison Officer (RLO) or regional Supervisor Liaison Officer (SLO), WAGPET Program Training Advisor (PTA) and/or Regional Medical Educator (RME).

WAGPET may make a determination at the conclusion of these discussions which will be advised to the parties in writing for their consideration.

If any party is still unsatisfied with the determination, they should refer to the WAGPET Program Appeals and Complaints Policy.

TF4.0 PLACEMENT POLICY

Last revision: 26 August 2021

Please refer to the AGPT Training Obligations Policy 2020, AGPT Program Leave Policy 2020 and the WAGPET GP Registrar Policy Handbook.

WAGPET has found that, wherever possible, the best training placements are made through a competitive process, involving GP registrar / GP supervisor/training facility negotiation, rather than direct matching by the Regional Training Organisation (RTO).

Placement process

Facilities wishing to have a registrar placed with them must submit their capacity for the next training year via MyMatch (Note: this does not cover Hospital placements including ARST/AST). This information is then available for GP registrars to view where there is capacity and to contact facilities to arrange interviews.

GP registrars will contact the facility to arrange interviews prior to the placement match occurring. If there is agreement between the GP registrar and the training facility a MyMatch request is then submitted for approval by both parties. The Match is then submitted for WAGPET's approval. If the match meets all the program requirements it will be confirmed by WAGPET.

If a training facility is unmatched WAGPET will assist by contacting unmatched registrars to discuss possible placement options. WAGPET is unable to guarantee that a placement will be available.

Placement confirmation

The Clinical Director of Training (CDT) approves all placement matches. No placement will be actioned without this approval.

Withdrawal from placement match

Once contracts are signed, withdrawal of either party will only be approved in extraordinary circumstances by the CDT and after full discussion between the GP registrar, RME and the training facility.

TF5.0 TRAINING FACILITY AND AHT SALARY SUPPORT PAYMENTS POLICY

Last revision: 26 August 2021

WAGPET provides practice support payments and in practice education payments to support training facilities providing supervision and teaching to GP registrars in GPT1/CGT1 and GPT2/CGT2 .

The payments policy applies to all accredited training facilities including Advanced Rural Skills posts and community placements.

Payment rates are outlined in Schedule 2 of the Training Facility's Training Services Deed.

WAGPET also administers the payment for Aboriginal Health Training (AHT) posts claiming salary support for registrars undertaking an AGPT core training term.

Funding for salary support for AHT training is determined by the Department of Health (DoH) and provided to WAGPET under contract by the Department of Health (DoH).

Funding to WAGPET under the AGPT Aboriginal and Torres Strait Islander Salary Support Program Policy 2018 is limited and WAGPET aims to distribute this equitably between ACCHSs. Salary Support payments are based on the location of the primary practice of the registrar's placement.

Within the available funding, WAGPET will support a registrar's fulltime equivalent training weeks in accordance with the AGPT Aboriginal and Torres Strait Islander Salary Support Program Policy 2018. WAGPET will only fund a maximum of 26 weeks per semester at the registrar's employed FTE. Accrued leave entitlements not taken during the semester will not be funded on termination.

To access salary support, WAGPET must be in receipt of a signed Training Services Deed and a copy of the registrar's employment contract. Upon confirming both are in place, WAGPET will confirm the total funding for the placement and the timing of the instalments to be paid.

Salary support payments for AHT training applies to all registrars enrolled in the AGPT program and undertaking general practice training with WAGPET and all Aboriginal Community Controlled Health Services (ACCHSs) accredited to take registrars enrolled in the AGPT program.

Please note that extension of training for any reason and remediation terms are not active training terms and as such no funding is available to support registrars undertaking these terms in AHT posts.

For WAGPET, eligible posts are ACCHSs – a primary health care service initiated and operated by the local Aboriginal community to deliver holistic, comprehensive and culturally appropriate primary health care to the community, which controls it.

Salary support funding procedure

Prior to the commencement of a placement, the ACCHS must provide a copy of the registrar's employment contract to WAGPET and have a current Training Services Deed in place.

WAGPET will confirm in writing the funding available for each placement and the timing of the monthly instalments by week 2 of each semester or earlier if practical.

To streamline the payment process and in accordance with the Training Services Deed, WAGPET will make payments monthly in arrears using Recipient Created Tax Invoices (RCTI), on or about the last day of the month. A copy of the RCTI will be provided to the ACCHSs nominated email address when payment is made.

Practice infrastructure and support payment procedure

In accordance with Schedule 1, Clause 14, WAGPET will pay in practice teaching payments, via Recipient Created Tax Invoice (RCTI) to the training facility's nominated bank account in five equal instalments over the semester on the last working day of each month (Semester 1 – February to June, Semester 2 August to December).

Placement changes

In the event that a placement is terminated prior to the end of the placement, for whatever reason, or the placement FTE weeks change, WAGPET may recoup the remaining portion of any practice support payment allocated to the Training Facility. WAGPET may reallocate an over payment to a future registrar placement if the Training Facility would be eligible to receive funds for a registrar placement in the next semester.

TF6.0 ISSUES RESOLUTION POLICY

Last revision: 26 August 2021

This policy should be read in conjunction with the ACRRM Training Organisation Standards 2020 and the RACGP Standards for General Practice Training updated 2021.

In order for GP registrars to receive safe, quality training on the Australian General Practice Training (AGPT) program, Western Australian General Practice Education and Training (WAGPET) accredited GP supervisors and training facilities must operate in accordance with the requirements of their accreditation and Training Services Deed. This policy outlines the approach that WAGPET will undertake to support GP supervisors or training facilities to resolve issues that are identified or when a GP supervisor, GP registrar or training facility is considered non-compliant with standards or policy.

WAGPET will support GP supervisor or training facility issues resolution through:

- regularly assessing and monitoring GP supervisor and training facility performance against the requirements of the AGPT program, standards and policies
- proactively working with GP supervisors or training facilities who exhibit deficiencies in professional, GP training or clinical competence and/or performance
- determining the appropriate level of the issues resolution action required as early as possible
- documenting, managing and evaluating any issues resolution actions and/or formal remediation plan.

GP trainer responsibilities

Through a structured process of regular monitoring, assessment and feedback, WAGPET will support GP supervisors and training facilities to meet their training obligations. Where issues arise, WAGPET will assist the GP supervisor or training facility to resolve any issues through informal means. Where the issue is more serious in nature or is ongoing, WAGPET will employ a formal remediation process.

WAGPET accredited GP supervisors and training facilities are required to:

- meet the training and education requirements of their AGPT accreditation status
- comply with the National Terms and Conditions for the Employment of Registrars (NTCER) and individual registrar employment agreements
- comply with the conditions of the WAGPET Training Services Deed
- act professionally, ethically, honestly and lawfully.

It is the responsibility of the GP supervisor and training facility to lawfully employ the GP registrar and ensure they fully understand the conditions of their employment agreement and working conditions before they commence employment. WAGPET will assist GP supervisors and training facilities where possible to resolve employment disputes with GP registrars. For more complex disputes, WAGPET may recommend any or all parties seek expert advice from organisations such as the Australian Medical Association (AMA) WA, GP Supervisors Australia (GPSA) and GP Registrars Australia (GPRA).

When a serious or ongoing issue is identified, WAGPET may instigate a formal remediation process aimed at resolving the issue in a structured and documented manner. The formal remediation agreement must be signed by all parties. Failure to reach agreement may result in de-accreditation.

WAGPET intervention

WAGPET will intervene as required when issues are identified that may affect a GP registrar's ability to perform their duties satisfactorily, safely and/or to progress through training. WAGPET will act immediately in circumstances where there are issues with:

- Coerced passively or actively to act illegally e.g. Medicare fraud
- GP supervisor professional behaviour
- given inadequate or inappropriate supervision and teaching given their learning needs.

- bullying or harassment
- GP registrar or patient safety, and/or
- satisfactory working and training conditions for the GP registrar.

WAGPET will not act on hearsay or third party comment. For an issue to be addressed using the principles of fairness and justice, all parties directly related to the issue must have access to all facts and information to respond to any claims.

If WAGPET considers that a GP registrar or patients are at risk as a result of the actions or performance of the GP supervisor and/or training facility, WAGPET may remove the GP registrar from the training facility immediately and/or move to de-accredit the GP supervisor and/or training facility and/or report any serious breaches to the relevant authorities.

Policy compliance

All WAGPET accredited sites are required to comply with the requirements of WAGPET policy. Failure to comply with policy and/or to resolve compliance or performance issues may lead to GP supervisor and/or training facility de-accreditation.

The performance of GP supervisors and training facilities is monitored through various mechanisms, including the collection of data and information from a variety of sources such as:

- GP365 activities and assessments
- GPR-MAP
- WAGPET Education and Assessment Framework requirements
- GP registrar consulting hours and patient data submitted via the WAGPET Portal
- In-practice teaching and supervision requirements
- Auditing of GP registrar employment agreements to see if they are NTCER compliant
- Training Services Deed compliance
- GP registrar feedback
- External Clinical Teaching (ECT) visitor feedback
- WAGPET Program Training Advisor (PTA) and Regional Medical Educator (RME) feedback, and
- Registrar Advisory Committee (RAC), Practice Manager Advisory Committee (PAC) and Supervisor Advisory Committee (SAC) feedback and advice.

Informal issues resolution

When an issue is identified through this monitoring and assessment process, WAGPET will where possible, follow an informal issues resolution process in the first instance in order to resolve the matter to the satisfaction of all parties concerned.

Minor issues should in the first instance be addressed directly between the GP supervisor, training facility and GP registrar without the need for WAGPET involvement.

If WAGPET involvement is necessary, the appropriate WAGPET staff, in most cases the PTA and/or RME, will speak with those directly involved in the issue to gather the facts and evidence.

Based on the information and evidence available, WAGPET staff will assist the GP supervisor and training facility to resolve the issue through informal means such as an agreed set of actions to be followed up and reviewed.

Formal issues resolution

Where an issue is more serious, ongoing or complex in nature, WAGPET may escalate the issue and invoke a formal issues resolution process. When this occurs, WAGPET will:

- formally notify the GP supervisor/registrar and/or training facility of an intention to commence a formal issues resolution process

- formally notify the GP supervisor/registrar and/or training facility of any documentation or evidence required within a specified reasonable timeframe, and
- arrange face to face meetings with those involved in the matter and/or visit the training facility to gather more information or evidence.

WAGPET will notify the GP supervisor/registrar/training facility within seven working days following the completion of the above process with the required steps or actions to resolve the matter.

This action plan may take the form of a formal remediation plan.

Formal remediation plan

Formal remediation may be used to correct serious identified issues which cannot be readily corrected through informal means. If a formal remediation plan is an identified requirement, the GP supervisor and/or training facility will be notified in writing. The formal remediation plan will have clear actions, monitoring and assessment methods, time frames and expected outcomes. WAGPET will monitor and support the GP supervisor and/or training facility throughout the process.

Failure to achieve the outcomes of the formal remediation plan may result in the GP supervisor and/or training facility being de-accredited. Where de-accreditation is indicated, the GP supervisor and/or training facility will be advised personally and in writing.

Formal remediation will be considered to be completed when the agreed conditions have been satisfactorily met and formally signed off by WAGPET and the facility.

Finalisation of issues resolution

At the end of any issues resolution process, WAGPET will inform the training facility of the outcome in writing. The outcome may be that:

- the identified problem has been addressed and the GP supervisor and/or training facility may continue or resume training; or
- the identified problem has not been addressed and the GP supervisor and/or training facility will progress to formal remediation; or
- the identified problem has not been addressed and the GP supervisor and/or training facility will be de-accredited.

Withdrawal of accreditation

Withdrawal of accreditation may occur where the GP supervisor or training facility fails to comply with any of the conditions of accreditation. Accreditation may also be withdrawn by WAGPET in the event of serious deficiencies.

Termination of GP supervisor and/or training facility accreditation requires the approval of the WAGPET Chief Executive Officer (CEO) or delegated officer.

Any decisions may be appealed in accordance with the WAGPET Appeals and Complaints Policy.

TF7.0 APPEALS AND COMPLAINTS POLICY

Last revision: 26 August 2021

Please refer to the AGPT Complaints Policy 2020 and AGPT Appeals Policy 2020.

Western Australian General Practice Education and Training (WAGPET) acknowledges that from time to time, decisions will be made that adversely affect a participant of the Australian General Practice Training (AGPT) program. WAGPET policy cannot and should not cover every eventuality. WAGPET policy creates a level field for all participants and assists WAGPET to achieve its intended professional obligations on behalf of the relevant college(s) and contracted obligations to the Department of Health (DOH) on behalf of the community.

WAGPET supports and encourages participants to access a transparent appeals and grievances

process and will deal with these in an efficient, just and respectful manner.

Complaints

Complaints are best resolved at the location closest to where the complaint arose. This provides the most relevant and contextual information and minimises compromise to ongoing working relationships.

Grievances are more serious and may be prohibitive in nature or involve direct or indirect discrimination. These allegations must be presented to the WAGPET Chief Program Officer (CPO) and/or Clinical Director of Training (CDT) at the earliest opportunity.

Extent of WAGPET influence

Note that WAGPET cannot:

- provide compensation to aggrieved parties
- remove conditions set by the Medical Board of Australia (MBA) or Australian Health Practitioner Regulation Agency (AHPRA)
- compel a training placement or Regional Training Organisation (RTO) transfer to another RTO
- confirm or back date a Medicare provider number
- make a recognition for prior learning decision, or
- resolve industrial or employment disputes outside a basic interpretation of the National Terms and Conditions for the Employment of Registrars (NTCER) and Fair Work Australia requirements.

Appeals can be lodged where other avenues have been exhausted and:

- the appeal is in writing with relevant documentation
- the aggrieved party can provide additional information that was not available or used when the decision was taken
- it can be shown that due process has not been followed
- the decision is not consistent with the provided valid evidence including policy, and
- the decision being challenged was communicated to the aggrieved party within the last 20 working days.

WAGPET will at all times:

- observe the rules of natural justice
- comply with legislative requirements
- provide clear documentation of the process used to make a decision, and
- publish and implement the reporting and appeals processes to be used when participants question a WAGPET decision.

Complaints arising at the local level

WAGPET will, in the first instance, encourage the parties to a grievance to resolve their issues together at the local level. WAGPET will support all parties in this endeavour.

Informal mediation

Where local resolution is not forthcoming or inappropriate, WAGPET will, on request from both parties, provide informal mediation. The complaint will need to be in writing from at least one of the parties. For non-clinical issues the WAGPET Chief Program Officer (CPO) will be the appropriate person and for clinical issues the Clinical Lead Program Support (CLPS) will determine whether themselves or the Regional Medical Educator (RME) are best to provide the mediation. Complaints relating to a WAGPET decision should also be directed to one of the above staff members in the first instance.

External parties also able to provide informal mediation and can be called upon e.g.:

- General Practice Supervisors Australia (GPSA) and/or General Practice Registrars Australia (GPRA), and
- Australian Medical Association Western Australia (AMA WA).

If the matter remains unresolved, the parties may seek the assistance of:

- The CPO or delegate for non-clinical matters and the CDT for clinical matters. That officer will make a ruling in the dispute based on evidence and following due process including:
 - relevant policy
 - evidence collected in the complaint process
 - engagement with the aggrieved parties
 - communication of, reasons for, and consequences of the decision
 - opportunity to respond to decision informally, and
 - opportunity to appeal.

Formal appeal

If the complaint remains unresolved a formal appeal must be submitted against WAGPET's decision. The appeals process is as follows

- the aggrieved party must submit an appeal to the Chief Executive Officer (CEO) in writing with supporting documentation within 20 working days of the decision being appealed
- the CEO or delegate will acknowledge receipt of the appeal within five working days

Action to address the complaint will be taken within 20 working days of the appeal. If the CEO declines the appeal the aggrieved party may appeal to the relevant college.

TF8.0 REGISTRAR AT RISK POLICY

Last revision: 26 August 2021

Western Australian General Practice Education and Training (WAGPET) always aims to ensure GP registrars are placed in supportive training environments. From time to time, GP registrars may encounter unforeseen difficult circumstances that would define them as being at risk under the terms of this policy.

To minimise the potential of issues occurring, WAGPET employs several mitigation measures including but not limited to:

- training facilities and GP supervisors are accredited to WAGPET and college standards and operate under a training services agreement that defines requirements
- GP registrars must agree to and sign the WAGPET Registrar Declaration to be eligible to enter the WAGPET Australian General Practice Training (AGPT) program. The declaration explains minimum requirements for program performance and acceptable behaviour
- In the first week of the general practice term, GP registrars must complete an orientation in the practice. GP registrars are advised of potential stressors and the range of support mechanisms available to them during their placement and how these may be accessed at their first regional education day
- An early safety assessment to ensure registrars new to GP are practising safely early in their training and have an appropriate level of supervision and support.
- GP registrars, GP supervisors and training facilities have regular one-to-one contact with WAGPET staff such as Program Training Advisors (PTA) and Regional Medical Educators (RME)
- An induction visit by WAGPET is provided to training facilities and employment requirements are discussed, and

- GP registrar and training facility handbooks are provided.

Your training facility must ensure that GP registrars practise in a safe environment at all times and that your training facility meets legislated occupational health and safety standards. Your training facility must ensure that GP registrar employment arrangements comply with the National Terms and Conditions for the Employment of Registrars (NTCER). All WAGPET AGPT supervisors must undertake ongoing professional development to support the development of supervisory and teaching skills.

Identification of a GP registrar at risk

All GP registrars are closely monitored through the early safety assessment activities and regional education days, PTA contacts, workshops, External Clinical Teaching (ECT) visits and GP supervisor reports during their placements. WAGPET has established reporting systems to support early notification of any issues so that appropriate action can be taken.

Identification of a GP registrar at risk may come from the GP registrar, training facility, GP supervisor, ECT visitor, RME, PTA, or sources external to WAGPET.

Management of a GP registrar at risk

All notifications of a GP registrar at risk, regardless of the source, will be directed to the Clinical Director of Training (CDT). Where WAGPET considers the risk to be significant, WAGPET may remove the GP registrar immediately from the placement. WAGPET will advise the GP registrar and the training facility in cases where WAGPET determines the placement must be terminated.

Circumstances that may warrant the immediate removal of a GP registrar from their placement include but are not limited to:

- proven bullying and harassment towards the GP registrar by the GP supervisor or training facility staff, and/or
- the GP registrar is being forced by the GP supervisor or training facility staff to operate in ways that are unsafe or unethical while consulting.

Circumstances that do not warrant a placement change but may warrant the remediation of the GP registrar, GP supervisor or training facility staff include but are not limited to:

- disputes over working conditions or employment agreements, or
- personality clashes between the GP registrar, GP supervisor or training facility staff that leads to feelings of discomfort.

The GP registrar will be assessed by WAGPET in consultation with relevant parties to assess the severity and consequences of the risk. A support plan will be developed with suitable timelines for review.

Where the GP registrar initiates a GP registrar at risk claim, they must demonstrate in writing and with evidence the circumstances that place them at risk. All information provided will become part of the GP registrar's training record and may be used in discussions with the GP supervisor or training facility staff in order to give them the full information and enable the GP supervisor or training facility staff the right of reply.

The PTA will coordinate the ongoing response to the training facility and will be responsible for ensuring all parties affected by the situation are informed of progress and receive information as appropriate.

The WAGPET Chief Executive Officer (CEO) will be advised of the issue and the proposed support plan.

Where the GP registrar, GP supervisor or training facility staff are not satisfied with decisions made in relation to this policy, they will have recourse to appeal via the WAGPET Appeals and Complaints Policy.

TF9.0 SUPERVISOR EDUCATION POLICY

Last revision: 10 June 2020

Continuing professional development in trainer education is important for all GP supervisors to ensure quality teaching and learning experiences for GP registrars.

Western Australian General Practice Education and Training (WAGPET) provides all accredited GP supervisors access to professional development activities directly related to enhancing skills in areas such as teaching, External Clinical Teaching (ECT) visits and regional education program delivery. WAGPET's education sessions may attract Continuing Professional Development (CPD) points with both Australian College of Rural and Remote Medicine (ACRRM) and Royal Australian College of General Practitioners (RACGP).

The purpose of this policy is to define the ongoing GP supervisor education requirements to ensure all GP registrar training is provided in accordance with the ACRRM and/or RACGP Standards as well as WAGPET and Department of Health (DOH) policies.

Education requirement

GP supervisors may complete as many hours as they wish of GP training-related education annually but WAGPET recommends that a minimum of six hours is completed per year. The education may be provided by WAGPET or other external relevant providers such as GP Supervisors Australia (GPSA), RACGP or ACRRM and may be face to face or virtual. The education should be focused on improving skills to supervise and teach GP registrars.

WAGPET accredited GP supervisors are encouraged to meet the education requirements detailed in this policy and in the Training Services Deed to be eligible to train WAGPET Australian General Practice Training (AGPT) registrars and maintain accreditation.

This policy should be read in conjunction with:

- RACGP and ACRRM vocational training pathway fellowship standards
- WAGPET Training Services Deed.

Education payments

A one-off capped payment of \$720.00 is paid per practice (including branch practices) per calendar year to support GP supervisor attendance at professional development activities, regardless of the number of hours completed. The training facility is responsible for apportioning this payment amongst the GP supervisors in the practice.

Access to CPD content may be offered as external provided resources or WAGPET provided face to face, virtual classroom, or teleconference sessions.

WAGPET will provide a GP supervisor education status update annually regarding hours completed. It is however the GP supervisor's responsibility to monitor their own completed hours of training.

TF10.0 EXTERNAL CLINICAL TEACHING VISITOR/FORMATIVE MINI-CEX ASSESSOR POLICY

Last revision: 26 August 2021

Regular assessment and professional coaching are critical components of apprentice-style training programs.

External Clinical Teaching (ECT) visitors and formative mini-Clinical Evaluation Exercise (mini-CEX) assessors provide independent advice, support and feedback to the registrars, their supervisors and their regional medical educators. They make a valid, reliable, measurable, practical and educationally valuable impact that helps ensure registrars are delivering safe quality care and receiving safe quality training. They provide teachable moments with an independent experienced peer and are regarded as among the most valuable components of the Australian General Practice Training (AGPT) program by registrars, and one of the most rewarding opportunities for general practitioners to teach the next generation of their profession without over-committing themselves.

Wherever feasible, assessors are selected for their local and contextual input during the visit and feed back to Western Australian General Practice Education and Training (WAGPET) on both general and specific issues affecting the registrars' progress through training e.g. the practice, the nature of the work undertaken, local challenges not necessarily experienced elsewhere.

Assessment visits

ECT visits required by the Royal Australian College of General Practitioners (RACGP) and mini-CEX assessments required by Australian College of Rural and Remote Medicine (ACRRM) are point-in-time events that capture current capability and when compared over time should demonstrate growing competence in action in the practice consultation context.

External assessors are ECT visitors and/or mini-CEX providers. All are carefully selected, trained, assessed and reviewed by WAGPET as competent and capable to undertake the role. Wherever possible, chosen assessors are local, or experienced clinicians relevant to the registrar's training. Not all assessors will be allocated all the visits they request and not all visits will be in the local area for that assessor.

External assessors must address any patient safety or quality care issues they observe in the course of the visit with the registrar, inform the supervisor immediately and report this to WAGPET urgently. Australian Health Practitioner Regulation Agency (AHPRA) mandatory reporting requirements apply for any ECT visitor or formative mini-CEX assessor as they do for any medical practitioner.

External assessors must meet the following requirements:

- maintain full and unrestricted AHPRA registration
- have no history of prior removal from the register for disciplinary action under any jurisdiction
- have acceptance by peers as an experienced clinician e.g. Fellowship of the Australian College of Rural and Remote Medicine (FACRRM), Fellowship of the Royal Australian College of General Practitioners (FRACGP) or equivalent
- have approved clinical time as a FACRRM and/or FRACGP post-fellowship
- maintain medical indemnity insurance covering the legal liability of the external assessor arising out of the services delivering an ECT visit and/or formative mini-CEX for an amount of not less than \$5 million for any one occurrence and unlimited in the aggregate
- engage with WAGPET under contract
- maintain comprehensive motor vehicle insurance covering legal liability against property damage and bodily injury to, or death of, persons (including bodily injury gap protection) caused by motor vehicles used in connection with the (goods and/or services) for an amount of not less than \$10 million for any one occurrence and unlimited in the aggregate, and
- maintain compulsory third-party insurance as required under any statute relating to motor vehicles used in connection with the services.

WAGPET will apply a consistent approach to the recruitment, selection and appointment of external assessors. The principles of equity, fairness and transparency will apply in all recruitment and selection processes.

In exceptional circumstances, WAGPET reserves the right to appoint by invitation an applicant who demonstrates the ability to meet or exceed the required capabilities.

External assessors must:

- complete ECT visitor/mini-CEX assessor training
- commit to attending specific ECT visitor/mini-CEX assessor up-skilling
- demonstrate ongoing appropriate clinical and mentoring skills
- conduct the agreed ECT visits or formative mini-CEX assessments on time, and

- respond to feedback provided by GP registrars, practices and WAGPET.

Assessor training counts towards WAGPET supervisor training requirements and may count towards college Continuing Professional Development (CPD) and/or Professional Development Program (PDP) where approved by the relevant college(s).

There is no maximum number of visits that may be allocated.

Assessors that do not fulfil their agreed allocation of visits will receive lower priority in the allocation process in the following year.

Application process

Suitably qualified clinicians should apply to WAGPET, providing the following via employment@wagpet.com.au:

- a written record of experience (current curriculum-vitae)
- their AHPRA registration number,
- ACRRM and/or RACGP membership numbers
- an outline of why they wish to be an ECT visitor and/or mini-CEX provider.

Assessor selection and engagement process

The information will be reviewed against the selection criteria and WAGPET's need for additional assessors.

Where an applicant is deemed suitable, they will be required to:

- complete WAGPET's online ECT visitor induction module
- attend a first interview with a WAGPET Clinical Lead. This may be conducted face-to-face or via video-conference as deemed appropriate. The purpose of the interview is to:
 - ensure the applicant understands the expectations of the role including training attendance, service delivery and annual allocation process
 - clarify any queries that the assessment team may have and
 - address any real or perceived conflicts of interest.
- complete an initial ECT visit and/or mini-CEX assessment.
- attend a second interview with WAGPET. This may be conducted face-to-face or via video-conference as deemed appropriate. The purpose of this second interview is to:
 - discuss feedback provided by the registrar for whom the assessor completed their initial ECT visit and/or mini-CEX assessment.
 - clarify any further queries that the assessment team may have, and
 - confirm suitability to be engaged as an ECT visitor and/or mini-CEX assessor.

Applicants who are deemed suitable will be offered a fixed term contract for services. Contracts may be renewable at the end of the fixed term period subject to assessor performance and compliance with requirements.

Please refer to the WAGPET ECT Visitor/Formative Mini-CEX Contract Template available on the WAGPET website. Applicants who are not deemed suitable will be notified and provided with feedback.

Annual allocation process

Annually, WAGPET will:

- determine ECT visit and mini-CEX requirements for the following year
- seek assessor ECT visit and mini-CEX assessment capacity for the following year
- allocate ECT visits and formative mini-CEX assessments against this capacity
- confirm with assessors their schedule at the beginning of each training semester via email

- provide all external assessors with online access for assessment reporting and management.

Assessors are required to:

- advise each semester their availability to undertake ECT visits and/or mini-CEX assessments
- where an assessor fails to advise of their availability, their contract for services may be terminated
- confirm each semester that they continue to meet the requirements for delivering ECT visits and/or mini-CEX assessments
- arrange visit times with the registrar(s) directly, notifying the practice manager and supervisor to ensure there will be sufficient patients booked (it is preferable if the supervisor is contactable and a meeting occurs during the visit, but not essential)
- advise WAGPET when a date is confirmed so travel and accommodation can be organised where authorised, minimising the cost e.g. where more than one ECT visit or mini-CEX assessment could be undertaken if there are multiple registrars involved
- directly observe, teach, assess and provide feedback during the session
- conduct the visits over a minimum of three clinical consulting hours
- provide verbal feedback to the supervisor on the registrar's progress at the end of the scheduled visit
- provide an online report to WAGPET within five working days of conducting each visit, a copy of which goes to the registrar's supervisor, Regional Medical Educator (RME) and Program Training Advisor (PTA) for review
- inform the Chief Program Officer (CPO) or Rural Program Manager (RPM) preferably immediately but no longer than within three days of the visit, where the assessor has concerns regarding the registrar
- follow AHPRA mandatory reporting requirements for notifiable conduct
- raise any patient safety concerns with the registrar's supervisor immediately and report them to WAGPET
- provide WAGPET with a tax invoice from the assessor's legal entity for the visit fee using either the online template provided in the confirmation email or their own tax invoice immediately following completion of the report
- invoices and reimbursement claims must be provided to WAGPET within 60 days of the visit to ensure payment.

Feedback/review

Assessors will be provided with ongoing feedback as appropriate.

TF11.0 TRAVEL AND ACCOMMODATION REIMBURSEMENT POLICY

Last revision: 26 August 2021

This policy sets out Western Australian General Practice Education and Training's (WAGPET) policy in relation to reimbursement of travel related expenses for non-WAGPET employees undertaking activities at the request of WAGPET which are not covered by a separate agreement or policy.

Expenses incurred in travelling for WAGPET business will be reimbursed to the person or organisation that incurred the cost. This will be done by electronic funds transfer only.

Persons or organisations with an Australian Business Number (ABN) must submit a tax invoice for the expenses with copies of receipts and invoices attached.

Persons or organisations that do not hold an ABN, must submit a Reimbursement of Expenses Claim form (please see the Forms, Policies and Guides page on the WAGPET website) together with original tax invoices or receipts (showing Goods and Services Tax (GST) applicable to the transaction).

Airfare

Air travel will be economy class only.

WAGPET will book all air travel unless WAGPET approves other arrangements for particular events. Once booked and confirmed, any changes to travel arrangements will be at the direct expense of the stakeholder.

Mileage

Road travel in a private vehicle will be reimbursed at the current Australian Taxation Office (ATO) mileage rates where air travel is not applicable. Air travel is not applicable when the destination to be visited does not have a direct air service.

Where a stakeholder uses their own vehicle instead of using air travel, WAGPET will reimburse kilometres at the current ATO mileage rates up to the value of the economy class airfare.

Accommodation and travel allowance rates

To ensure appropriate budget management and avoid excessive claims, WAGPET reimbursements are capped at a maximum amount.

These amounts apply to both intra and interstate travel.

The travel reimbursement rates include all taxis, parking, hotel accommodation, meals and other incidental expenses that are directly attributable to attending the meeting or representing WAGPET.

Travel	Max. Payment
Overnight stay not required	\$80
Overnight stay required, WAGPET has directly paid hotel accommodation	\$120 (\$240 if two-night stay required)
Overnight stay required; traveler has directly paid hotel accommodation	\$355 (\$710 if two-night stay required)

WAGPET reserves the right to refuse reimbursement of any expense that it believes is unreasonable.

These amounts reflect ATO “reasonable travel and overtime meal allowance expense amounts for the income year”.

If for any reason a traveller believes they have a legitimate claim that exceeds the amount available under this policy, they should speak with the appropriate WAGPET contact for that activity in the first instance.

All claims must be submitted in accordance with WAGPET Accounts Payable Policy.

Reimbursement process

Complete a Reimbursement of Expenses Claim form or provide a tax invoice, together with original receipts/expenses and submit to WAGPET for payment.

As per WAGPET’s Accounts Payable Policy, all claims should be submitted to WAGPET within one month of the expense being incurred. Claims should be directed to the WAGPET employee with whom the stakeholder has been liaising.

Upon receipt of claim, WAGPET will review the claim to ensure:

- the claim identifies the activity for which the traveller was engaged
- that amounts claimed are as agreed or within maximum allowances

- the claim is in the correct format and with appropriate attachments
- the claim is appropriately approved.

TF12.0 EXTENUATING AND UNFORESEEN CIRCUMSTANCES DEFINITION

Last revision: 30 November 2018

Please refer to the AGPT Program Leave Policy 2020

For the purposes of this policy framework, extenuating and unforeseen circumstances are determined as defined in the Australian General Practice Training (AGPT) policies. These are described as circumstances which were unforeseen and outside a GP registrar's control when they accepted a place on the Australian General Practice Training (AGPT) program. These circumstances will not be considered as unforeseen if it can be determined that the circumstances were known or reasonably should have been known by the GP registrar prior to the acceptance of their place on the AGPT program.

Examples of extenuating circumstances may include:

- ill-health (other than minor illnesses)
- deterioration of an existing medical condition that can no longer be managed in the current location
- bereavement
- acute personal/emotional circumstances
- hospitalisation
- illness of an immediate family member
- a major change to a registrar's personal circumstances; or
- an involuntary change in a spouse's employment.

Extenuating circumstances do not include, for example:

- a change in relationship status from single to partnered or married, or
- a change in family circumstances (including starting a family and children's schooling).

TF13.0 SUPERVISION POLICY

Last revision: 26 August 2021

Please refer to the RACGP Training Standards and ACRRM Training Organisation Standards 2020 and your WAGPET Training Services Deed.

This policy is designed to support GP supervisors and training practices to continuously assess their capacity and preparedness to operate effectively as Australian General Practice Training (AGPT) supervisors and training practices.

The policy outlines the requirements for accredited Western Australian General Practice Education and Training (WAGPET) GP supervisors. It provides information that supports the college standards and sets a benchmark to ensure that high quality supervision and training is consistently delivered in the general practice setting.

WAGPET ensures supervision and training standards are met by accrediting and reaccrediting GP supervisors and training facilities every three years and by auditing periodically. Accreditation ensures the quality of the standard of supervision and training is maintained and that GP registrars have access to teachers and mentors with appropriate clinical, supervision, teaching and assessment experience and competence.

Quality safe training environment

At all times, the GP supervisor is responsible for ensuring that:

- the GP registrar demonstrates the minimum competence required to ensure patient safety.

- the GP registrar requests and receives the appropriate assistance in all clinical situations and that they demonstrate the ability to recognise and manage acute and life-threatening scenarios.

The training facility should have in place:

a documented model of supervision that meets college supervision and training standards and curriculum. This must include processes for developing and adjusting the model of supervision as required.

- procedures for monitoring GP registrar progression as well as evaluating and addressing critical incidents.
- have processes in place to capture GP registrar feedback and to identify and trigger early intervention strategies and actions.
- ensure that the GP registrar's clinical work does not exceed safe working hours and that it makes allowance for education activities.
- that the GP registrar has the appropriate amount of cultural competence and has access to WAGPET cultural educators and mentors.

Teaching, feedback and support.

Accredited GP supervisors should be familiar with a range of teaching methods and should use them selectively to support clinical training.

GP supervisors should:

- ensure that GP registrars receive quality teaching, feedback and support.
- organise GP registrars' clinical workload to be compatible with their training commitments.
- be located at the same practice as the GP registrar and be available for most of the hours worked by the registrar.
- provide formal teaching, supervision and support and ad hoc corridor teaching to meet the Standards requirements and take into consideration the GP registrar's progress and performance.

The level of supervision must support safety for the patient and the GP registrar and be matched to the registrar's level of competence. GP supervisors should continually assess the level of supervision required against the following:

1. GP registrar does not see patients alone
2. GP registrar has access to immediate assistance
3. GP registrar receives reflective assistance
4. GP registrar receives mentoring

The GP supervisor must monitor the GP registrar's wellbeing and encourage personal responsibility for self-care.

The principal GP supervisor may delegate supervision to an accredited additional supervisor who must assume the same responsibilities.

GP registrar orientation

GP registrars must be well prepared by the GP supervisor and training facility to undertake a term at the accredited site. The GP supervisor is responsible for ensuring that the orientation is provided.

As a minimum, the GP registrar orientation should include:

- an introduction to practice staff

- the GP registrar's role, accountabilities and responsibilities
- an overview of the teaching and supervision, support, assessment and evaluation approach used by the GP supervisor
- discussion about how the GP registrar can provide feedback
- a discussion of practice hours, dedicated study and administration time and education release
- administrative arrangements, billing, practice software
- location of resources including reference materials, medications and equipment
- practice policies and procedures for referral, hospital admissions, patient follow up
- a system to deal with urgent medical situations, including where relevant equipment is stored and how to access it

Training plan

The GP supervisor should:

- assess the GP registrar's learning objectives and ensure they have a wide range of clinical experiences and training.
- support the GP registrar to develop a learning plan with realistic learning goals. The learning plan should be informed by the GP supervisor's assessment of the registrar's performance in relation to their stage of training.

GP registrar assessment

The GP supervisor is responsible for ensuring that the GP registrar's skills are continually assessed and that they are working safely. Adopting a programmatic assessment approach, the GP supervisor should consider the supervision and support required that is appropriate to the registrar's stage of training and progress and where necessary, provide additional supervision, support and training until the registrar can practise safely.

The assessment process should include case discussion and review, direct observation, review of logbooks, assessments and clinical notes, audit of documentation such as referrals, medical records and pathology and radiology requests.

The GP supervisor is responsible for continually monitoring and assessing the GP registrar's performance and providing ongoing constructive feedback to ensure the learning plan objectives are met.

Supervision requirements for Visiting Medical Officers (VMO)

It is the responsibility of the GP supervisor to ensure that the GP registrar is supervised when acting as a VMO. The standards set for community-based supervision and teaching of GP registrars also apply for GP registrars undertaking VMO activity and on-call rosters.

When a GP registrar is engaged in VMO and on-call activity, the GP supervisor remains responsible to ensure the required level of supervision provided to the GP registrar is commensurate with their stage of training and individual competence.

Team-based supervision

GP registrar supervision may be provided by a team and does not need to be the sole responsibility of one GP supervisor.

Accredited training facilities adopting a team-based supervision approach, must have the supervision model planned and documented and approved by WAGPET.

TF14.0 PRIVACY POLICY

Last revision: 26 August 2021

Western Australian General Practice Education and Training (WAGPET) recognises the importance of privacy and our obligations to those who share their private information with us in the delivery of and participation in Australian General Practice Training (AGPT) in WA.

This policy describes how WAGPET Ltd protects information in accordance with its obligations under the Privacy Act 1988 (Privacy Act) and the Australian Privacy Principles (APPs) while at the same time managing the AGPT in WA, ensuring safe quality training for GP registrars and safe quality care is being provided to the community.

Further information on the APPs can be found on the Office of the Australian Information Commissioner's website: <https://www.oaic.gov.au/>

This policy describes:

- how and why we collect personal information
- how your information is used
- when and with whom we share information, and
- how you can access and amend your personal information.

Personal information we collect

WAGPET will only collect personal information needed to administer and promote the programs we deliver.

This includes processing applications for the program, dealing with the ongoing management of doctors enrolled in the programs, conducting training in conjunction with our external training service providers and other regional training providers, managing the accreditation and reaccreditation of training facilities and GP supervisors, and providing information about our programs to prospective applicants (direct marketing).

Examples of personal and sensitive information we may collect includes your:

- name, residential and work telephone numbers
- residential, work and email addresses
- occupation
- academic and employment history
- family background, and
- financial records.

Examples of sensitive personal information we may collect include your:

- medical history
- racial or ethnic origin; and
- indigenous affiliation.

Personal information you give to us

We may collect your personal information directly from you when you enquire or apply for one of our training or placement programs or participate in our program as a service provider. We also collect your personal information during your engagement with us so that we can monitor and appraise performance and training or placement needs.

We also collect information to assist us to assess whether the program is meeting participant needs specifically, and the needs of participants generally. We will not collect sensitive personal information about you unless you consent, and the information is reasonably necessary for one or more of our functions or activities.

Personal information we collect from other sources

We may collect personal information or sensitive information from a person or entity other than the individual. We will not collect this information for purposes outside the scope of the services that we are

contracted to provide.

If we do collect your personal information from another source, we will take reasonable steps to ensure that you are made aware:

- that we collected your personal information from another source
- what we will do with the information; and
- any other person or body to whom we may share or disclose the information

We may collect sensitive personal information in accordance with the exceptions contained in APP 3.4 of the Privacy Act. For example, if the collection is required or authorised by or under an Australian law or by a court of tribunal order.

What we do with your personal information

We use and disclose personal information to enable us to carry out our business of providing pre-vocational and vocational education, training and placement services for medical practitioners. We will use your personal information to:

- process and monitor applications
- manage your training for the duration of the training period or placement
- facilitate Department of Human Services (Medicare) and any incentive payments
- report to the Department of Health (DOH) and other Commonwealth agencies, and the Australian College of Rural and Remote Medicine (ACRRM) and Royal Australian College of General Practitioners (RACGP) as necessary
- conduct quality assurance and other program activities;
- undertake research, for example analysis of demand for medical services and distribution of doctors in our program; and
- promote and direct market programs to prospective applicants.

Sometimes we may use and disclose personal information for purposes that are related to the primary purpose. For example, to conduct surveys or undertake activities to assist us to improve our services and procedures.

We will not use your sensitive personal information for another purpose unless it is directly related to our functions and activities.

We may use or disclose personal information in accordance with the exceptions contained in APP 6.2 and APP 6.3 of the Privacy Act.

A link to the Federal Privacy Act is here: <https://www.oaic.gov.au/assets/privacy/app-guidelines/app-guidelines-july-2019.pdf>.

Organisations we may disclose to

Sometimes we need to disclose your personal information to persons or organisations outside WAGPET. You may reasonably expect that we may disclose your personal information to:

- referees that have been included in an application
- training service providers who provide training or training support services to WAGPET including the Aboriginal Health Council of Western Australia (AHCWA), Australian Medical Association (AMA) WA, Rural Clinical School (RCS) of Western Australia, Rural Health West (RHW), Western Australian Country Health Services (WACHS), and Western Australian Primary Health Alliance (WAPHA)
- agencies involved with relevant official administration, monitoring, registration and verification activities such as the Australian Health Practitioner Regulation Agency (AHPRA), Department of Health, Department of Human Services (Medicare Australia), ACRRM and the RACGP

- contractors or agents who provide services to us, for example, External Clinical Teaching Visitors (ECTV), Regional Advisory Committees, data management contractors and associated contractors, and marketing and promotional contractors
- General Practice Supervisors Australia (GPSA)
- General Practice Registrars Australia (GPRA).

Can you request to deal with us without identifying yourself?

We understand that anonymity is an important element of privacy. In most cases, we need to know who you are to process and/or manage your application, training or enquiry. You can request to deal with us without identifying yourself or by using a pseudonym. However, in some instances this may not be possible, for example, when making a complaint, we may need to know your identity in order to investigate the complaint, in relation to a particular service provided by a training post.

If it is practicable to deal with us on an anonymous basis, we will take measures to ensure that information you provide on an anonymous or pseudonymous basis is not able to be linked with other information we may have about you. If you wish to deal with us on an anonymous or pseudonymous basis, contact the Privacy Officer.

Do we send your personal information overseas?

It may be necessary for us to send your personal information overseas, for example to an overseas based data assessment or questionnaire assessment institution or firm with which we are collaborating in medical training assessment and research. We will not send the information outside Australia without your consent or unless the transfer complies with APP 8 (cross-border disclosure of personal information) or where we are obliged to do so under contract with the Department of Health.

How we keep your personal information secure

WAGPET uses a range of physical and electronic security measures to protect personal information from misuse and loss, and from unauthorised access, modification or disclosure. For example, we restrict physical access to our offices, employ security containers, firewalls, secure databases, computer user identifiers and passwords.

Emails you send to us are screened by our email security systems and may be viewed by authorised WAGPET information technology personnel and subcontractors for security purposes.

Automated information collection

When you visit the WAGPET website our server makes a record of that visit and logs the following information:

- your server address
- the top level domain name (for example .com, .gov, .au, .uk);
- the date and time of the visit to the site
- the pages accessed and documents downloaded
- the previous site visited; and
- the type of browser used.

The data listed above is collected to facilitate website and system administration, including monitoring to prevent security breaches and enhancement of the website to meet users' needs.

We do not attempt to identify users or their browsing activities except in the unlikely event of a criminal investigation, for example where a law enforcement agency has issued a warrant to inspect our server logs.

We do not use cookies when people make general visits to our website. Cookies are small text files that may be transferred to your computer's memory by the servers of some of the websites you visit. Their purpose is to track and store information about a visitor's usage of a website.

We do use cookies in relation to some of the specific web pages we have established for particular clients to allow them limited access to information via our intranet. These cookies are used only during a browsing session and expire when the visitor closes his or her browser.

WAGPET's website has links to other internet sites. Once you leave our website, the guidelines of this privacy policy no longer apply. Please read carefully the relevant privacy policies or terms and conditions governing these linked sites to ensure your privacy is protected.

How to access your personal information

WAGPET will provide you with access to your personal information, subject to any applicable exceptions under the Privacy Act. We will first require you to verify your identity in a manner that is reasonable in the circumstances and specify the information you wish to access.

If we refuse your request, we will provide you with reasons for the refusal. For example, if we are not satisfied as to the identity of the requestor.

You will not be charged for lodging a request to access your personal information.

Requests for access to personal information should, in the first instance, be directed to the Privacy Officer who will refer the request to an appropriate person within WAGPET.

How to update your personal information

We will take all reasonable steps to ensure that your personal information is accurate, up to date, complete and relevant.

If you are able to establish that your personal information is inaccurate, out of date, incomplete, irrelevant, or misleading, we will take reasonable steps to amend the information.

If we update or amend personal information about you that we previously disclosed to another entity, and you request that we notify that entity, we will take reasonable steps to give that notification.

If we refuse your request to amend or update your personal information, we will give you a written notice setting out the reasons for the refusal, the mechanisms available to complain about the refusal, and any other matter prescribed by regulations. If you ask us to, we will associate the information with a statement that the information is inaccurate, out of date, incomplete, irrelevant or misleading in accordance with your request.

How you can complain about WAGPET's privacy practises

If you have a concern about the way in which WAGPET handles your personal information and wish to make a complaint, contact the Privacy Officer.

Under the Privacy Act, the Privacy Commissioner has the power to investigate complaints or acts or practises that may be a breach of privacy even if there is no direct complaint to the Privacy Commissioner. If you have made a complaint to us about a WAGPET practice that you think amounts to an arbitrary or unreasonable interference with your privacy, and you do not believe that the matter has been resolved satisfactorily, you should either write to the Privacy Commissioner setting out the details of the practises which you think interfere with your privacy, or telephone the Privacy Hotline 1300 363 992 (local call charge).

If you wish, you are able to make a complaint directly to the Privacy Commissioner rather than to WAGPET. In most cases, however, it is likely that the Privacy Commissioner would refer you to WAGPET in the first instance to see if your complaint can be resolved without requiring the involvement of the Commissioner.

Further information

To find out more about WAGPET's management of personal information, contact our Privacy Officer:

The Chief Financial Officer

Western Australian General Practice Education and Training Ltd

Telephone: 08 9473 8200

Email: privacyofficer@wagpet.com.au

For more information on the Privacy Act and the APPs:

Visit the website the Office of the Australian Information Commissioner www.oaic.gov.au or contact the Privacy Hotline 1300 363 992 (local call charge).

We will, from time to time, review and revise this Privacy Statement. We reserve the right to amend this policy at any time and any amendments will be notified by the posting of an updated version on our website at: wagpet.com.au/resources.

Privacy Definitions

Privacy Act 1988 (Privacy Act)	Legislation which aims to safe guard and protect individual’s personal and sensitive information: oaic.gov.au/agencies-and-organisations/app-guidelines/
Australian Privacy Principles (APPs)	The 13 APPs replace the National Privacy Principles and are enacted legislation found in the Privacy Amendment (Enhancing Privacy Protection) Act 2012 (Cth): oaic.gov.au/agencies-and-organisations/app-guidelines/
Personal Information	Any information or an opinion about an identified individual, or an individual who is reasonably identifiable; whether the information or opinion is true or not; and whether the information or opinion is recorded in a material form or not. What constitutes personal information will vary, depending on whether an individual can be identified or is reasonably identifiable in the particular circumstances.
Privacy Officer	<p>The Chief Financial Officer is WAGPET’s appointed Privacy Officer. The role of the Privacy Officer will include:</p> <ul style="list-style-type: none"> ● participating in the development of initiatives that have a potential privacy impact ● providing advice on the general application of the Privacy Act 1988 (Privacy Act) to the agency’s general operations ● handling, or supervising the handling, of privacy complaints and enquiries ● training staff in aspects of the Privacy Act that apply to their day-to-day activities ● being the primary privacy contact for the Office of the Australian Information Commissioner.
Sensitive Information	<p>Sensitive information is a subset of personal information and is defined as information or opinion (that is also personal information) about an individual’s:</p> <ul style="list-style-type: none"> ● Racial or ethnic origin ● Political opinions ● Membership of a political association ● Religious beliefs or affiliations ● Philosophical beliefs ● Membership of a professional or trade association ● Membership of a trade union ● Sexual preferences or practices; or ● Criminal record ● Health information about an individual ● Genetic information (that is not otherwise health information) ● Biometric information that is to be used for the purpose of automated biometric verification or biometric identification, and ● Biometric templates. <p>Sensitive information is generally afforded a higher level of privacy protection under the APPs than other personal information. This recognises that inappropriate handling of sensitive information can have particular ramifications for the individual concerned or those associated with the individual. For example, some kinds of sensitive information, such as information relating to race or ethnic origin, may provide the basis for discrimination or other forms of mistreatment. Mishandling of this information may also lead to humiliation or embarrassment or may undermine an individual’s dignity.</p>

TF15.0 EMERGENCY REMOTE SUPERVISION POLICY

Last revision: 17 June 2020

Onsite supervision is the preferred model of supervision in the WAGPET GP training program. There may however, be some circumstances when this model may not be available or practical.

Assessment of, and approval to implement short-term emergency remote supervision arrangements, is the responsibility of the Clinical Director of Training (CDT). Arrangements for periods longer than six weeks may need College approval.

Posts applying for approval to implement an emergency remote supervision arrangement must provide a detailed plan on how the model of supervision will operate. The emergency remote supervision plan should include:

- a. **A profile of the registrar:** Intended hours of work and the type of work the registrar will undertake. The registrar's level of training and assessment of their competence.
- b. **The supervision team:** Details of accredited GP supervisors, alternate accredited GP supervisors, and the extended practice support team and details of any accredited offsite supervisor(s). The location(s) and availability of each of these along with their role(s) in relation to the registrar. The lines of communication between onsite and offsite supervisors should be outlined.
- c. **Implementation and orientation:** How the arrangements will be implemented and how the registrar will be introduced and orientated to any supervisors that they have not previously met, the contact and communication arrangements and training in the use of any required technology.
- d. **Clinical supervision plan:** An outline of the supervision roster for the supervisors or other health professionals who will support and assist the registrar with clinical issues, and their contact arrangements. Back-up arrangements should be in place if the offsite supervisor is unavailable for any reason (e.g. serious emergency, planned annual leave).
- e. **A teaching plan:** An outline of the arrangements and circumstances for how corridor teaching will take place.
- f. **Additional issues for consideration:**
 - i. Offsite supervisors must be accredited to the College's standards and WAGPET requirements.
 - ii. Patient consent: The registrar should seek verbal patient consent before contacting an offsite supervisor about a clinical issue and document this in the patient record.
 - iii. Clinical procedures: Any registrar with limited experience in undertaking clinical procedures, must organise an onsite supervisor with the necessary clinical capability to assist until they gain confidence.

Registrars working in facilities where emergency remote supervision arrangements exist will be monitored closely by their Regional Medical Educator (RME) to ensure adequate progression. This will be overseen by the CDT, or delegate, and may include frequent contact with the supervisors, registrars, other staff involved, ECT visitors and training advisors.

Supervisors and facilities must continue to maintain all other training accreditation standards.

POLICY UPDATE SCHEDULE

Last Handbook revision date	Policy section that has changed	Previous Handbook wording that has changed	New wording in this Handbook
24 February 2021	TF2.0 Accreditation Policy		Additional wording about the requirement for all GP supervisors to have unconditional Specialist General Practice registration listed with AHPRA.
24 February 2021	TF2.0 Accreditation Policy	Training facilities are accredited to take an approved maximum number of GP registrars, usually 2 Full-Time Equivalent (FTE).	Training facilities are accredited to take an approved maximum number of GP registrars, up to 2 Full-Time Equivalent (FTE).
24 February 2021	TF3.0 Employment Agreements with GP Registrars Policy	Removed WAGPET is not an industrial relations organisation	
24 February 2021	TF5.0 Payments Policy	TF5.0 Training Facility and AHT Salary Support Payments Policy	AHT salary support payments information added
24 February 2021	TF6.0 Issues Resolution Policy		Additional information about WAGPET intervention GPR-MAP included as a monitoring mechanism
24 February 2021	TF8.0 Registrar at Risk Policy		Changes to name of education activities - All GP registrars are closely monitored through the early safety assessment activities and regional education days. Deleted activity – Online induction modules for training facilities
18 June 2020	TF1.0 Professional Behaviour policy	None	Additional section added reminding GP supervisors of AHPRA good practice guidelines section 3.14 advising them not to treat other staff, friends or family
18 June 2020	TF7.0 Appeals and Complaints policy	Appeals against decisions now to go directly to relevant College and step for appeal to be heard by a WAGPET Review Committee has been removed.	If the CEO declines the appeal the aggrieved party may appeal to the relevant College.
17 June 2020	Full policy handbook formatting review	Minor policy edits to update for AGPT 2020	Refer to individual policies.

		policies and staff title changes	
31 January 2020	TF8.0 Registrar at Risk policy	Updated to reflect the new early safety assessment that has been implemented as part of the 2020 education and assessment framework.	New dot point Under the section: To minimise the potential of issues occurring, WAGPET employs several mitigation strategies including but not limited to: * an early safety assessment to ensure registrars new to GP are practising safely early in their training and have an appropriate level of supervision and support.
15 July 2019	Full policy handbook formatting review	Nil	Nil
7 January 2019	Full policy handbook formatting review	Nil	Nil
14 December 2018	Full policy handbook review and edit to bring multiple policies into line with the AGPT 2019 policies	Substantial policy edits to reflect the updates to policies in line with AGPT 2019 policies.	Because of the extensive policy edit, please refer to policy in full.
30 November 2018	Full policy handbook review and edit to bring multiple policies into line with the AGPT 2019 policies	Substantial policy edits to reflect the updates to policies in line with AGPT 2019 policies.	Because of the extensive policy edit, please refer to policy in full.
13 June 2018	TF13.0 Supervision Policy	New policy	New policy
13 June 2018	TF14.0 Privacy Policy	Policy number change from TF13.0 to TF14.0	
26 April 2018	TF4.04 Placement Policy	Policy edit regarding placement process	Placement process includes the option to be manually matched prior to the automated preferences process
21 March 2018	TF10.0 External Clinical Teaching Visits Policy	Substantial policy edit across the full policy	Please refer to the updated policy in this handbook in full

<p>6 February 2018</p>	<p>TF1.0 Professional Behaviour Policy</p>	<p>The report must include detail of the event(s) and evidence to substantiate claims. The report must also outline any action that has been planned, has already occurred and/or recommendations to resolve the issue. The Chief Operating Officer and/or Clinical Director of Training will inform all relevant parties in writing of the actions to be undertaken including any necessary intervention.</p>	<p>The report must include detail of the event(s) and evidence to substantiate claims. The report must also outline any action that has been planned, has already occurred and/or recommendations to resolve the issue. The Chief Operating Officer and/or Clinical Director of Training will inform all relevant parties in writing of the actions to be undertaken including any necessary intervention. The RACGP and/or ACRRM and AHPRA will be notified as appropriate.</p>
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GLOSSARY

COMMON ACRONYMS AND TERMINOLOGY

ACRRM	Australian College of Rural and Remote Medicine
AGPAL	Australian General Practice Accreditation Limited
AGPT	Australian General Practice Training Program
APHRA	Australian Health Practitioner Regulation Agency
AMA	Australian Medical Association
ARST	Advanced Rural Skills Training
AST	Advanced Specialised Training
CEO	Chief Executive Officer
CDT	Clinical Directory of Training
CLPS	Clinical Lead Program Support
CPO	Chief Program Officer
Core Vocational Training	GPT1, 2 and 3 and Extended Skills for FRACGP. Core Generalist Training and Advanced Specialised Training for FACRRM.
DOH	Department of Health
ECT/ECTV	External Clinical Teaching/Visitor
FARGP	Fellowship in Advanced Rural General Practice (RACGP)
FTE	Full-Time Equivalent
GP365	Online learning and assessment tool for registrars in their first two terms of the AGPT program
GPRA	General Practice Registrars Australia
GPSA	General Practice Supervisors Australia
GPT1/CGT1	General Practice Term 1/Primary Rural Remote Training 1; the first six months of GP training
GPT2/CGT2	General Practice Term 2/Primary Rural Remote Training 2; the second six months of GP training
GPT3/CGT3	General Practice Term 3/Primary Rural Remote Training 3; the third six months of GP training
(GPT4) Extended Skills/CGT4	General Practice Term 4/Primary Rural Remote Training 4; the fourth six months of GP training. Known as Extended Skills in RACGP
PAC	Practice Manager Advisory Committee
PLO	Practice Manager Liaison Officer
PTA	Program Training Advisors are responsible for a single hub and are the primary contact person for their hub for all WAGPET and AGPT program-related inquiries and support.
RAC	Registrar Advisory Committee
RACGP	Royal Australian College of General Practitioners
RLO	Registrar Liaison Officer – the RAC member responsible for supporting registrars in the regions
RME	The Regional Medical Educator assigned to mentor you outside the practice setting. The RME may be based at WAGPET or within your region; they are a practicing GP and are there to make sure you are on the right track to meet your fellowship requirements.
SAC	Supervisor Advisory Committee
SLO	Supervisor Liaison Officer – supports other GP supervisors in the region and is a member of the RAC.
UX	The online platform for registrars, supervisors and training facilities to access online resources such as forms, eLearning, GP365 and training records.

Western Australian General
Practice Education and Training
(WAGPET) Ltd.

Suite 12, 16 Brodie Hall Drive
Technology Park, Bentley WA 6102
PO Box 1233, Bentley DC WA 6983
ABN 88 097 914 219

T (08) 9473 8200
F (08) 9472 4686
E admin@wagpet.com.au
wagpet.com.au

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